Monkeypox (hMPXV) update – October 4th, 2022

About Monkeypox (hMPXV)

Monkeypox is a disease caused by a virus not common in the United States, but regularly seen in other parts of the world. It is a known virus **characterized by a rash** that can be painful, and often includes flu-like symptoms. It usually is spread through close physical contact. It is related to smallpox but is much less severe; most individuals recover fully without treatment.

In relative terms, Monkeypox is not very transmissible and will not spread like COVID-19. Studies are currently underway to further understand the epidemiology, sources of infection, and transmission patterns. Track U.S. cases here.

Transmission

Monkeypox can spread from person to person primarily through close skin-to-skin contact. This may include sex, cuddling, massage, and kissing.

Routes of transmission that remain uncommon in this outbreak:

- Contact with towels, clothing or other objects that have been in contact with Monkeypox lesions
- Large respiratory droplets that might come from prolonged face-to-face contact

At this time there is no evidence of Monkeypox being transmitted by attending an outdoor event with fully clothed people; trying on clothes or shoes at a store; traveling in an airport, on a plane or on other public transportation; swimming in a pool; using a public restroom; or casual contact with other people.

Case Counts

With containment measures, vaccination, and behavior change, global cases continue to decline now resting at 69,244 total cases. The U.S. case growth has shifted downward with a total of confirmed Monkeypox cases. This shift comes with substantial variation by state. Globally, the U.S. continues to be one of the most affected countries along with Brazil, France, and Spain. Oregon is not seeing a sustained decrease, but the rise in cases has slowed. There are 214 total cases in Oregon as of 9/28, and as of 10/5, the Clackamas county case count has increased by three to 9 total cases identified.

In Oregon, 33% of people diagnosed with Monkeypox were living with HIV. Approximately 90% of people diagnosed with Monkeypox and living with HIV in Oregon were virally suppressed (i.e., had an undetectable viral load indicating effective antiretroviral treatment). Six percent had CD4 counts less than 200 cells/mm3, an indication of a compromised immune system or AIDS and a greater risk of complications from Monkeypox.

There have been 26 Monkeypox global deaths with the first confirmed American death among a severely immunocompromised person in Los Angeles. There are now 2

The CDC has started releasing rapid data summaries and technical reports. For more insight into U.S. Monkeypox outbreak data and response visit https://www.cdc.gov/poxvirus/monkeypox/cases-data/technical-report.html

Prevention

Surveillance and rapid identification of new cases is critical for outbreak containment. During human Monkeypox outbreaks, close contact with infected persons is the most significant risk factor for Monkeypox virus infection. To prevent the spread of the virus:

- Do not have skin-to-skin contact such as through sex or other intimate contact if you or your partner have symptoms of Monkeypox.
- Ask potential partners about illnesses or rashes.
- Wash hands thoroughly if you have contact with someone with Monkeypox.
- If you get symptoms, isolate yourself at home until you can connect with a health care provider.
- Consider limiting partners you engage in intimate contact or sex with until two weeks after you have received a second dose of the Monkeypox vaccine.

Vaccines

At this time, Oregon has sufficient vaccine supply, and it is recommended for anyone who identifies as being at risk for getting Monkeypox. The vaccines are effective at protecting people against Monkeypox before exposure. However, it can also help prevent disease or make it less severe after exposure. The CDC recommends the vaccine be given within four to fourteen days of exposure to prevent or limit disease.

The Jynneos vaccine continues to be offered to eligible people considered to be at high risk for Monkeypox infection, and is approved for ages 5months and older. Currently, Clackamas County is offering Jynneos to all individuals 15 years of age and older who consider themselves at risk of coming into contact with monkeypox at our Clackamas Town Center vaccine pod.

OHA Expands Eligibility Criteria for Monkeypox Vaccine

As of 9/14/22 OHA eligibility criteria for Monkeypox Jynneos vaccine has expanded to include anyone who knows other people in their social circles or communities who have had Monkeypox, and who regularly has direct skin-to-skin contact with people in that social circle. Eligibility also continues to include:

- Individuals identified by public health departments as close contacts to a known Monkeypox case.
- Anyone who has had close contact with someone with Monkeypox.
- Laboratory workers routinely performing Monkeypox testing.
- Clinicians with a high risk occupational exposure.

Get Vaccinated

Clackamas County Public Health is offering Jynneos vaccine clinics for individuals at risk for Monkeypox on Tuesdays and Wednesdays at Clackamas Town Center from 11am to 7pm. All appointments must be scheduled in advance. The clinic is able to co-administer COVID bivalent boosters as well.

Clackamas County continues to work with partners at OHA, other counties and community clinics to address the vaccine needs for our community. Other partners in the region also offering Jynneos vaccine: https://mpoxvaxmap.org/

Testing and Treatment

Testing: Testing for Monkeypox is available. Ask a health care provider about testing if you develop a new rash/bumps/sores, especially if you know or suspect you have been in contact with anyone with the infection. Testing is available through commercial laboratories, and most medical providers should have the ability to test. They do not need permission from Public Health to test for Monkeypox.

Treatment: Effective therapeutics have already been developed and are available through healthcare providers. The antiviral TPOXX (tercovirimat), for example, was developed specifically for smallpox but works for all orthopoxviruses including Monkeypox. This treatment can prevent serious complications in those at risk and can decrease the severity of pain and other symptoms for those diagnosed with Monkeypox.

Other Resources

Clackamas County provides multiple resources at the Clackamas Town Center Monkeypox vaccine clinics via community partners and other public health departments. These resources include:

- Cascade AIDS Project (CAP) providing onsite full STI testing and Navigator offering support to individuals to access healthcare and HIV pre-exposure prophylaxis (PrEP) therapies
- Narcon (naloxone HCl) distribution and education via Public Health
- Rapid HIV home test distribution via Public Health

See the Clackamas County Public Health Monkeypox (hMPXV) webpage for more information and resources.